#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

7. By the lodgement of this report to the insurers, you hereby consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/05/2019 15:31
Date Of Accident	28/05/2019 07:25
Exact Location Of Accident	LOR 27A GEYLANG TO GEYLANG RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBG891J
Insured/Policyholder	
Name Of Registered Owner	SERVICE STATIONARY & TRADING PTE LTD
Co Reg No	A200903210C
Email Address	SALES@SERVICESTAT.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62743255
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV200-1.5 ABS AIRBAG 2WD 6DR EURO 5 (M)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700012219-01
Cover Note Number	31/05/2018 - 30/05/2019
Driver	
Name of Driver	CHUNG ENG KEE
NDIC No	C4424400 I

NRIC No S1434108J Date Of Birth 16/06/1960 Occupation **INDOOR** 13/01/1982 **Date Of Driving Pass** 

**Driving Experience** 37 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98154538

Fax Number **Contact Number** 

**EMail Address NOEMAIL** 

92 PIPIT RD #10-97 Address

S370092 Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

Type Of Accident **COLLISION - CHANGE/CROSS LANE** 

Weather Conditions **CLEAR** Road Surface DRY

**Other Information** 

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

1

NO

2

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

Refer to attached sketch plan

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO

Was there any audio recorded?

Vehicle Registration Number

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

YN7433T

MITSUBISHI FUSO Vehicle Make/Model/Colour

**Details Of Properties** 

**GOODS VEHICLE** Vehicle Category Name of Driver SEE HUP BOON

NRIC/Passport Number S1591195F

**Contact Number** 

Address Postcode

Insurance Company Name ERGO INSURANCE PTE. LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN	Lor 27A Gerlang	
		A-686 891 J B+YH 7433 T
DESCRIBE CIRCUMSTANCES O		Ceylong Ad
Policia a loca	Los 27A Gallas to Gal	Trace Bol Who are Ille and
sonng along	For all Geglang to Ocq.	lang Rd. When near the main road,
a long suddenly do	are out tom the parking	lot & hit onto my vahicle on my
right. No one way	injured	
3	V	
Important:		- Reporting Only
You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14)		- Claim OD
DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame		ne - Claim TP
from the day of the occurrence.		- Claim OD/ TP at other workshop
DECLAR 特別與貿易私人有所 WE SRIVET STANGAR OF COMMON TO 18, BOON LAY WAY TRADEHUB 21 #04-142 SINGAPORE 609966 TEL: 6274 3255 Fax: 6278	midpars are true in every respect.	hus scrivice

Policyholder's signature Date & Time Driver's Signature (if driver not the policyholder) Date & Time

Reporting Centre Personnel's Signature Name: Nric/Fin No.

#### Sketch Plan Pg. 2

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
  - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Date & Time:

服務文具貿易私人有限公司 SERVICE STATIONERY & TRADHING PTE IJD 18, BOON LAY WAY TRADEHUB 21 #04-142 SINGAPORE 609866

TEL: 6274 3255 Fax: 6278 1306
Policyholder's Signature

Date & Time:

Driver's Signature (If driver is not the policyholder)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



# CERTIFICATE OF INSURANCE

#### COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Service Stationery & Tracing Ptc Ltd

Vehicle No.

GROBBILL

Period of Insurance

; 31 May 2018 To 30 May 2019

Policy No.

1.1700012219-01

Engine No.:

: K9KC400D056981

Endorsement No.

Chassis No.

: VSKYBAM20Z0144964

Issued Date

: 04 May 2018

#### ABOUT THE COVER

Make/Model-

: NISSAN NV 200

Engine Capacity/Tonnage : 0.6 Tonnage

Sum Insured Market Value

First Year of Registration | 1 2017

Driver Restriction

- NA

Off Peak Car .: No.:

Insuring with COE/PARF : Yes

#### Person or Classes of Persons Entitled to Orive";

a) Any parson who is other give the Policyholder's uniter or with their permission.
b) Policy will indepently the Policyholder or any authorized driver unity if inside mustic the specified against ellitim.

You have to pay an expectable is not \$1,000 as through exists inexperienced better flucted (1/10 %) if You have by Your Authorized Chiese (secretary or annumed) is under the age of 25 and/or the less. Heart T. Secure: Brigary despendence

Age Condition

: All Age Condition

Limitation as to use"

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2) you for the confidence of poster filter for the consecution will now him except the posterior and the confidence of the filter of the confidence of the confidence of the filter of the confidence of the conf

\* Limitations renconstring that the Residual State Section 8 of the Motor Vehicles (Trini-Party Risks and Compensation) Act (Cop. 185) and Scales 85 of the Resid Transport Act, 1987 (Mally set), are not to be included under free headings.

#### **EXCESS**

Section 1
Fire I SO Cwn Damage - \$000, Theth- 50, Flood Cover - \$8

Section 1 Property Domogr - 80

Wandquaeee : \$100

Married Driver and Excess (where applicable)

140

#### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

my asserts repairs to the Vehicle exist be-carried out by one of our nutriested Receivers. Within the first 3 years of the first registration of the Vehicle in Singlepon. You have the option of having the production of the Vehicle in Singlepon in Central Special Special

#### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

play, so way dust the policy to which this Devilloris or insurance visions is insured in accordance with the provisions of the Meter Veridos (Third Party Rights and Develope select) Add Cos. 1905. Port IV of the Need Transport Add. 1907 (Need Septimental and Motor Veridos (Third Party Rights, 1924) printerplay.

06200003000

WORG CHUAY LIN JIDANIKA 9 DAMPINES GRANDE ATMAK AIA TAMPINES SINGAPORE SOUTH SP-WILLY-WASIEWLEONG

Underwritten by AKS Asia Pacific Insurance Pis. Ltd.

AIG Asia Pacific Insurance Ptc. Ltd. AUTHORISED REPRESENTATIVE











































































